

**MONTGOMERY COUNTY, MARYLAND  
DEPARTMENT OF HOUSING AND COMMUNITY AFFAIRS  
DIVISION OF CONSUMER AFFAIRS  
100 MARYLAND AVENUE, ROOM 330  
ROCKVILLE, MARYLAND 20850  
☎ 240-777-3636 ♣ FAX 240-777-3768**

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**BUILDING CONTRACTOR'S LICENSE APPLICATION FOR A NEW LICENSE**

**Please read instructions carefully before completing this application.**

**INSTRUCTIONS**

- 1. Type or print in ink!!!**
  - 2. To avoid delay in the processing of your application, please be sure to answer every question clearly and completely.**
  - 3. A non-refundable registration fee of \$700 must accompany this application. Make check or money order payable to Montgomery County, Maryland.**
  - 4. All Pages must be completed.**
  - 5. Please notify this office within 30 days of any changes that occur in the information contained in this application. Failure to do so may result in the suspension or revocation of your license.**
  - 6. If you are a foreign or out of state corporation, you must have a Resident Agent registered in Maryland.**
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**I. TYPE OF BUSINESS (CHECK ONE)**

**II.**

Corporation ☐    Limited Liability Corp. ☐    Partnership ☐    Sole Proprietor ☐  
**Limited Liability Corp. Must fill out Section A and B**

**A. CORPORATION**

Fill out this section if your home building business is a **CORPORATION**. If you do business in Maryland as a corporation, **you must furnish the name of the resident agent of your corporation in Maryland**, and provide your federal employment identification number. If your corporation is a Limited Liability Corporation, be sure to provide the information requested in Sections A and B.

**Name of Corporation**\_\_\_\_\_

Trade Name (If any)\_\_\_\_\_

Date of Incorporation \_\_\_\_\_ Federal ID No. \_\_\_\_\_ Phone No. \_\_\_\_\_

Business Address \_\_\_\_\_ Fax No. \_\_\_\_\_

Mailing Address (If different from business address)\_\_\_\_\_

If you have a Maryland State Home Registration License, please provide license number\_\_\_\_\_

## Cond't Corporation

**Full Name of Resident Agent in Maryland** \_\_\_\_\_

Address \_\_\_\_\_

Business Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

Fax No. \_\_\_\_\_

**President** \_\_\_\_\_

Address \_\_\_\_\_

Business Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

**Vice President** \_\_\_\_\_

Address \_\_\_\_\_

Business Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

**Treasurer** \_\_\_\_\_ Home Address \_\_\_\_\_

\_\_\_\_\_ Home Phone No. \_\_\_\_\_

**Secretary** \_\_\_\_\_ Home Address \_\_\_\_\_

Business Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

List all persons, members, or organizations holding a financial interest of 10% or more in the business. If a limited liability corporation, list the names of all members who have the authority to enter binding agreements on behalf of the corporation.

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

## B. Limited Liability Corporation

List if any of the members of the corporation are corporations, partnerships, or other limited liability entities, provide the information requested in **SECTION A** for each such member on a separate sheet of paper.

_____	_____	_____
Member	Business Phone No.	Home Phone No.

_____	_____	_____
Member	Business Phone No.	Home Phone No.

If more than 2 members, provide additional information on a separate sheet.

**C. PARTNERSHIP**

Fill out this section if your business is a **PARTNERSHIP**. Provide the names of all partners holding a 10% or more interest in business. If the partnership is a limited partnership, please identify the general partner.

**Name of Business** \_\_\_\_\_

Trade Name (If any) \_\_\_\_\_

Business Address \_\_\_\_\_

\_\_\_\_\_

Business Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

Mailing Address (If different) \_\_\_\_\_

\_\_\_\_\_

**Full Name of Partner** \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

Business Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

**Full Name of Partner** \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

Business Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

(If more than 2 partners, provide additional information on a separate sheet.)

If you have a Maryland State Home Registration, please provide license number \_\_\_\_\_

**D. SOLE PROPRIETORSHIP**

Fill out this section if your homebuilding business is a **SOLE PROPRIETORSHIP**

**Full Name** \_\_\_\_\_

Trade Name of Business \_\_\_\_\_

Business Address \_\_\_\_\_

\_\_\_\_\_ Business Phone No. \_\_\_\_\_

Fax No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

\_\_\_\_\_

If you have a Maryland State Home Registration, please provide license number \_\_\_\_\_

## II. INTEREST IN OTHER HOME BUILDING ENTITIES

1. Do any individuals named in Sections A, B, C or D have or had in the past ten years any interests in any other new home building companies in Montgomery County or any other jurisdiction?  
If yes, please list below their names and the companies involved. Yes \_\_\_\_\_ No \_\_\_\_\_  
(Use a separate sheet if necessary.)
2. Have any building or construction -related licenses issued to any individuals or companies named in Sections A,B,C, or D been suspended, revoked, surrendered, or not renewed in Montgomery County, or any other jurisdiction?  
(If so, please explain on a separate sheet of paper). Yes \_\_\_\_\_ No \_\_\_\_\_

## III. BUILDER DESIGNEE

The Builder Designee must be an individual designated by your homebuilding business who is a partner, officer, director, or manager of your homebuilding business and is the individual responsible for on-site building activity. This individual must be authorized by you to enter into binding agreements on behalf of the homebuilding business. A sole proprietor is automatically the Builder Designee.

Name of Builder Designee \_\_\_\_\_

Business Address \_\_\_\_\_

\_\_\_\_\_

Home Address \_\_\_\_\_

Business Phone No. \_\_\_\_\_ Home Phone No. \_\_\_\_\_

## IV. REFERENCES AND FINANCIAL RESPONSIBILITIES

1. **Please provide** a copy of the declarations page of any insurance policy you have for general liability and workman's compensation coverage. If you do not have such coverage, please explain below: \_\_\_\_\_  
\_\_\_\_\_
2. **Please provide** three current letters of reference from suppliers of construction materials as a credit reference, using the forms that are attached to this application.
3. **Please provide** a current letter of reference from a bank or other lender as a credit reference.

## V. LEGAL ACTIONS

1. Has any officer, director, or owner holding a financial interest of 10% or more in this homebuilding business ever filed for bankruptcy?..... Yes\_\_\_\_No\_\_\_\_  
If yes, please explain on a separate sheet of paper.
2. Has any building or construction related licenses for this homebuilding business been suspended revoked, surrendered, or not renewed for cause in Montgomery County or any other jurisdiction? ..... Yes\_\_\_\_No\_\_\_\_  
If yes, please explain on a separate sheet of paper.
3. Are there any building code violations now outstanding against the business?..... Yes \_\_\_\_No\_\_\_\_  
If yes, please explain on a separate sheet of paper.
4. Are there any pending lawsuits or unsatisfied judgments outstanding against persons or businesses named in this application? ..... Yes\_\_\_\_No\_\_\_\_  
If yes, please explain on a separate sheet of paper.
5. Has any officer, partner, building designee, or any owner been convicted of a felony in the last ten years? ..... Yes\_\_\_\_No\_\_\_\_  
If yes, please explain on a separate sheet of paper.

## VI. EXPERIENCE

1. **Please furnish in detail the experience and qualifications** of the officer, partner, or owner responsible for construction in Montgomery County. **Resumes for the appropriate individuals may be attached.**

2. Please list your most recent new home construction experience, if any, and who got the building permits:

<u>Project Address</u>	<u>Type</u> <u>(SF, TH, Condo)</u>	<u>No. of Units</u>	<u>Date Completed</u>
------------------------	---------------------------------------	---------------------	-----------------------

_____	_____	_____	_____
_____	_____	_____	_____

3. Was the above construction experience as a new home builder, subcontractor or employee? Explain in detail.

_____
_____

4. List new home building activity planned for next year in Montgomery County:\_\_\_\_\_

5. Do you have any building permits pending for new home construction in Montgomery County? If yes, please explain..... Yes \_\_\_\_ No.\_\_\_\_

6. List membership in any trade associations relating to construction:

1. \_\_\_\_\_ 2 \_\_\_\_\_

## Cond't Experience

7. Do you have any other construction-related experience or education, such as experience in home-improvement work, college or trade-school courses, etc?..... Yes \_\_\_\_ **No** \_\_\_\_  
**If so, attach a copy of any relevant license and describe your experience and education in detail.**

## VII. CERTIFICATION

**I HEREBY CERTIFY** that I have read and fully comprehend this form in its entirety and that the information herein provided is true and complete to the best of my knowledge. I understand that should any statement I have made prove false, misleading, or erroneous, it may result in the rejection of my application or the revocation of any license that may be issued. By signing this application, I do solemnly declare and affirm under the penalties of perjury, that the contents of this application are true and correct. I hereby certify that I am authorized to sign on behalf of the business organization applying for this license.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

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**DO NOT WRITE BELOW THIS LINE**

**TO BE COMPLETED BY BOARD MEMBERS**

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**Approved**

☐

**Disapproved**

☐

**Cond. Approved**

☐

**Deferred**

☐

**Denied**

☐

**Reinstated**

☐

**Member Signature:**

\_\_\_\_\_

\_\_\_\_\_

**Date**

**License No.** \_\_\_\_\_

**Approved Date:** \_\_\_\_\_

**Issued Date:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_\_

**Revenue Receipt No.** \_\_\_\_\_

## **MATERIAL SUPPLIER REFERENCE**

THIS FORM MUST BE COMPLETED BY A SUPPLIER OF BUILDING MATERIALS WHERE A CREDIT ACCOUNT HAS BEEN ESTABLISHED. FORMS COMPLETED BY SUBCONTRACTORS ARE NOT ACCEPTABLE. THE APPLICANT ACCOUNT NAME ON THIS FORM MUST MATCH EXACTLY THE BUSINESS NAME ON THE APPLICATION FOR BUILDING CONTRACTOR'S LICENSE. THE SIGNED ORIGINALS MUST BE SUBMITTED WITH THE LICENSE APPLICATION.

Applicant: \_\_\_\_\_

Applicant Account Name: \_\_\_\_\_

Name of Material Supplier: \_\_\_\_\_

Types of Materials Supplied: \_\_\_\_\_

Length of Time Account has been open: \_\_\_\_\_

Credit Limit: \$ \_\_\_\_\_

High Balance: \$ \_\_\_\_\_

Payment Status: \_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Information provided by: \_\_\_\_\_

Signature

Title

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date

This information is required to be made part of the Application for Building Contractors License issued by the Department of Housing and Community Affairs, Division of Consumer Affairs.